1 AMY L. DOBBERTEEN Assistant Deputy Director, Bar No. 155111 2 DEBRA L. DENTON Assistant Chief Counsel, Bar No. 164482 PATRICIA STURDEVANT 3 Senior Counsel, Bar No. 54681 4 CALIFORNIA DEPARTMENT OF MANAGED HEALTH CARE 5 Office of Enforcement 980 Ninth Street, Suite 500 Sacramento, CA 95814-7243 6 (916) 323-0435 (916) 323-0438 Telephone: 7 Facsimile: Attorneys for Complainant 8 9 10 BEFORE THE DEPARTMENT OF MANAGED HEALTH CARE 11 OF THE STATE OF CALIFORNIA 12 IN THE MATTER OF: 13 DMHC No.: 04-265 14 PLATINUM HEALTH PLUS, LLC OAH No.: 15 ORDER REINSTATING CEASE & Respondent. DESIST ORDER AND TERMINATING 16 ITS SUSPENSION; NOTICE OF RIGHT TO HEARING 17 18 TO: PLATINUM HEALTH PLUS, LLC 19 The Director of the Department of Managed Health Care, by and through her 20 designee, Assistant Deputy Director, Amy L. Dobberteen, makes the following order 21 reinstating the Cease & Desist Order issued on September 22, 2004 and terminating its 22 suspension forthwith. 23 This Order is based on Respondent's failure to comply with the terms and provisions 24 of the Order Temporarily Suspending Cease & Desist Order and Imposing Licensing 25 Requirements and Conditions issued on January 4, 2005. It is further based on Respondent's 26 failure to honor its commitments to the Department to utilize only approved advertising and 27 telephone marketing scripts and to cease selling insurance products in connection with 28 /// -1-

- 1. Failed to take the necessary preliminary steps to filing an application for licensure under the Knox-Keene Health Care Service Plan Act of 1975, Health & Safety Code sections 1340 *et seq.*, as required by paragraph 1.A. of that Order, in that it failed to schedule and complete the Department's electronic filing training course on or before January 31, 2005, as directed by paragraph 1.A.1.;
- 2. Failed to immediately implement the operational changes necessary and sufficient for full compliance with the provisions of the Health and Safety Code relating to holding itself out as a health care service plan, deceptive advertising, misleading telemarketing scripts, inexact and deceptive price advertising, and inappropriate offers of gifts or bait, among other things; and, in particular, sections 1360, 1360.1, 1361, 1365(a), 1365.5, 1366, 1367 (a), (b), (c), (d), (e)(1), (f), (g) and (h)(1); 1368.02(b), 1373(a), 1379, 1381, 1384(a), (d) and (f); 1385 and 1395 of the Knox-Keene Act, as required by paragraph 1.B.;
- 3. Failed to comply with the alternative set forth in paragraph 1.C., by submitting no information and documentation whatsoever, in its letter dated January 31, 2005, confirming that it altered its business operations sufficiently and as necessary to bring Respondent's operations within the scope of the Director's Opinion 01/1; and, despite the Department's notification of the inadequacy of that communication and specific request for five categories of documents, failing to submit satisfactory information and documentation in its subsequent letter dated February 10, 2005;
- 4. Failed to submit for the Department's prior review and approval, in Spanish and in English, any and all advertising and marketing materials to be used in connection with the sale of discount health cards, as required by paragraph 1.D. of that Order; and

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1	5. Fa	iled to cease a	and des	ist from the sale of Accidental Death and	
2	Di	smembermen	t and A	ccident insurance in connection with the sale of	
3	discount health cards, as required by paragraph 1.E.				
4	THEREFORE, IT IS HEREBY ORDERED:				
5	That the Order temporarily suspending the Cease & Desist Order issued on				
6	September 22, 2004 is hereby terminated, and the Cease & Desist Order issued on September				
7	22, 2004, a copy of which is attached hereto as Exhibit 1, is reinstated, effective				
8	immediately.				
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10	Dated: February 24,	, 2005		LUCINDA EHNES	
11				Director Department of Managed Health Care	
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14					
15			By:	AMY L. DOBBERTEEN	
16				Assistant Deputy Director	
17	,			Office of Enforcement Department of Managed Health Care	
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	1	AMY L. DOBBERTEEN					
	2	Assistant Deputy Director, Bar No. 155111 DEBRA L. DENTON					
	3	Assistant Chief Counsel, Bar No. 164482 PATRICIA STURDEVANT					
	4	Senior Counsel, Bar No. 054681 CALIFORNIA DEPARTMENT OF					
	5	MANAGED HEALTH CARE Office of Enforcement DEPARTMENT OF MANAGED HEALTH CARE					
	6	980 Ninth Street, Suite 500 Sacramento, CA 95814-7243					
•	7	Telephone: (916) 323-0435 Facsimile: (916) 323-0438					
	8	Attorneys for Complainant					
	9						
1	0	BEFORE THE DEPARTMENT OF MANAGED HEALTH CARE					
1	1	OF THE STATE OF CALIFORNIA					
1	2						
1	3	IN THE MATTER OF:) DMHC No.: 04-265					
1	4	PLATINUM HEALTH PLUS, LLC OAH No.:					
1	5	CEASE AND DESIST ORDER AND					
1	6	Respondent. NOTICE OF RIGHT TO HEARING (Health and Safety Code sections 1349)					
1	7	(Health and Safety Code sections 1349, 2 1360, 1386, 1391 and 1395)					
1	8						
1	9	TO: PLATINUM HEALTH PLUS, LLC					
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. 2	1	The Director of the Department of Managed Health Care, by and through her					
2	2	designee, Assistant Deputy Director Amy L. Dobberteen, after investigation, determines as					
2	3	follows:					
. 2	4	I.					
2	.5	INTRODUCTORY STATEMENT					
2	6	1. California Health and Safety Code section 1349 requires certain entities					
2	7	arranging for health-care services to first obtain a license from the California Department of					
2	8	Managed Health Care. Respondent is acting as a health care service plan, arranging for					
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Cease and Desist Order and Notice of Right to Hearing

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provision of health care services, and accepting periodic payments. Accordingly, it is operating as a health care service plan as defined in Health and Safety Code section 1345(f)(1), and required to obtain a license under the Knox-Keene Health Care Service Plan Act of 1975 ("Knox-Keene Act"). Respondent's failure to obtain a license subjects it to the enforcement powers of the Department of Managed Health Care.

- Disregarding California law, the out-of-state entity set forth above is soliciting 2. low income, Spanish speaking California residents for purposes of selling health-care services without a license, misleading California consumers and misrepresenting its product. It purports to provide a discount on health care services, but no discounts are available because providers have no arrangement with Respondent to give discounts, and because discounts are only available to members who pay in full for doctor and hospitalization services before or on the day they are rendered.
- Therefore, the Department of Managed Health Care, by the Order below, hereby directs Respondent to cease and desist from any further unauthorized, deceptive and unlawful activity in the State of California.

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STATUTORY AUTHORITY

- 4. The Director of the Department of Managed Health Care is vested with the responsibility to administer and enforce the Knox-Keene Health Care Service Plan Act of 1975 ("Knox-Keene Act", Health and Safety Code section 1340, et seq.) The intent and purpose of the Knox-Keene Act is to promote the delivery and quality of health and medical care to the people of California who enroll in a health care service plan by, among other things: "Prosecuting malefactors who make fraudulent solicitation or who use deceptive methods, misrepresentations, or practices, which are inimical to the general purpose of enabling a rational choice for the consumer public." (Health and Safety Code sections 1341 and 1342(c).)
- Health and Safety Code section 1345(f)(1) defines a health care service plan to mean:

Any person who undertakes to arrange for the provision of health care services to subscribers or enrollees or to reimburse 2 any part of the cost for those services, in return for a prepaid or periodic charge paid by or on behalf of the subscribers or 3 enrollees. 4 The Legislature has plainly evidenced its intent as to the application of the Knox-Keene Act in Health and Safety Code section 1399.5, which provides: 5 It is the intent of the Legislature that the provisions of this 6 chapter shall be applicable to any private or public entity or political subdivision which, in return for a prepaid or periodic charge paid by or on behalf of a subscriber or enrollee, 7 8 provides, administers or otherwise arranges for the provision of health care services.... 9 10 Any person conducting business as a health care service plan is required to have a license under the Knox-Keene Act pursuant to Health and Safety Code section 1349, 11 12 which provides: 13 It is unlawful for any person to engage in business as a plan in this state or to receive advance or periodic consideration in 14 connection with a plan from or on behalf of persons in this state unless such person has first secured from the director a license, then in effect, as a plan or unless such person is 15 exempted by the provisions of Section 1343 or a rule adopted 16 thereunder. A person licensed pursuant to this chapter need not be licensed pursuant to the Insurance Code to operate a 17 health care service plan or specialized health care service plan unless the plan is operated by an insurer, in which case the insurer shall also be licensed by the Insurance Commissioner. 18 19 8. Untrue and misleading advertising and solicitation, both by affirmative misstatement and by omission of important information, is prohibited by Health and Safety 20 21 Code section 1360, which provides: 22 No plan, solicitor, solicitor firm, or representative shall use or permit the use of any advertising or solicitation which 23 is untrue or misleading, or any form of evidence of coverage which is deceptive. For purposes of this article: 24 25 1. A written or printed statement or item of information shall be deemed untrue if it does not conform to fact in 26 any respect which is, or may be significant to an enrollee or subscriber, or potential enrollee or 27 subscriber in a plan. 2. A written or printed statement or item of information 28 shall be deemed misleading whether or not it may be literally true, if, in the total context in which the

Cease and Desist Order and Notice of Right to Hearing

statement is made or such item of information is communicated, such statement or item of information 2 may be understood by a person not possessing special knowledge regarding health care coverage, as indicating any benefit or advantage, or the absence of 3 any exclusion, limitation, or disadvantage of possible 4 significance to any enrollee, or potential enrollee or subscriber, in a plan, and such is not the case. 5 6 7 No plan, or solicitor, or representative shall use or (b) permit the use of any verbal statement which is untrue, misleading, or deceptive or make any representations 8 about coverage offered by the plan or its cost that does not conform to fact. All verbal statements are to be 9 held to the same standards as those for printed matter 10 provided in subdivision (a). 11 9. Health and Safety Code section 1386(b)(7) specifically proscribes conduct that constitutes fraud or dishonest dealing or unfair competition, as defined by Section 17200 of 12 13 the Business and Professions Code. 14 Health and Safety Code section 1395 further requires that: 10. ...Any price advertisement shall be exact, without the use of such phrases as "as low as," "and up," "lowest prices" or words or phrases of similar import. ... Price advertising shall 15 16 not be fraudulent, deceitful, or misleading, nor contain any 17 offers of discounts, premiums, gifts, or bait of similar nature. In connection with price advertising, the price for each product or service shall be clearly identifiable. 18 19 11. The Director is empowered to enforce compliance with this Act by Health and 20 Safety Code section 1391, subdivision (a)(1), which provides in relevant part: 21 The director may issue an order directing a plan, solicitor firm, or any representative thereof, a solicitor, or any other 22 person to cease and desist from engaging in any act or practice in violation of the provisions of this chapter, any rule 23 adopted pursuant to this chapter, or any order issued by the director pursuant to this chapter. 24 25 IV. 26 VIOLATIONS OF LAW 27 .12. Respondent is undertaking to arrange for the provision of health-care services 28 to members, either directly or through arrangements with others, in return for a periodic -4-

Cease and Desist Order and Notice of Right to Hearing

charge paid by the members, within the meaning of Health and Safety Code section 1345(f)(1). Additionally, Respondent is providing, administering or otherwise arranging for the provision of health care services within the meaning of Health and Safety Code section 1399.5. Respondent therefore is engaging in business as a health care service plan in this state and receiving advance and periodic consideration in connection with a plan from or on behalf of persons in this state, without having first secured a license from the Director. This conduct violates Health and Safety Code section 1349.

- doctors, dentists, hospitals, and pharmacies that are unavailable because Respondent does not respond within three days as represented; no doctors are available nearby, providers have never heard of Platinum Health Plus; providers will not accept the discount card; providers have not agreed to offer discounted prices, or providers give uninsured patients a discount off the amount insureds pay, so even with the card, a member would pay the same or less than if paying cash without the card. Nor are discounts available from pharmacies such as Costco, despite the fact that Respondent's Membership Guide lists Costo as a participating pharmacy. Additionally, the advertising and solicitations are misleading because they promise a list of providers but do not send one. Finally, Respondent's marketing of a 30 day Satisfaction Guarantee involves representations that are untrue. These practices violate Health and Safety Code sections 1360(a)(1) and (b). (Exhibit A attached hereto)
- 14. Respondent's advertising and solicitation practices are misleading in violation of section 1360(a)(2) and (b) by using language typically associated with insurance coverage, and by offering its health care product in conjunction with Accidental Death and Dismemberment and Accident insurance products. (Exhibit B attached hereto)
- 15. Respondent's advertising and solicitations are misleading in further violation of section 1360(a)(2) and (b) by failing to mention, or to clearly and conspicuously disclose, that payment in full for doctor services and hospitalization is required at the time that services are rendered. This limitation or disadvantage is of significance to both potential members and paying members, particularly for the low-income population targeted by

Respondent.

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Respondent's conduct described herein constitutes fraud or dishonest dealing 16. or unfair competition, as defined by section 17200 of the Business and Professions Code, in violation of Health and Safety Code section 1386(b)(7).

Respondent is engaging in prohibited price advertising using terms such as "up 17. to," in fraudulent, deceitful, or misleading advertising of non-existent discounts, and of offering insurance policies as premiums, gifts or bait to persuade consumers to enroll as members, in violation of Health and Safety Code section 1395.

CEASE AND DESIST ORDER

Based on the foregoing, the Director finds that Respondent has violated Health and Safety Code sections 1349; 1360, subdivisions (a)(1), (a)(2), and (a)(3); 1386(b)(7) and

THEREFORE, pursuant to Health and Safety Code section 1391 of the Knox-Keene Act:

IT IS HEREBY ORDERED:

- That Respondent, and any of its directors, officers, trustees, managers, 1. affiliates, agents, and all persons participating with them or acting in concert with them, shall immediately CEASE AND DESIST FROM:
 - Operating in California without a Knox-Keene Act license. a.
 - Promoting any further deceptive or misleading advertisements or b. solicitations to California residents;
 - Conducting any enrollment activities in California for health-care memberships, including, but not limited to, medical, dental, hospitalization, and pharmacy;
 - Taking, receiving, or forwarding any application for health-care d. memberships from California residents;
 - e. Collecting or receiving, in full or in part, any payments for health-care

memberships from or on behalf of California residents;

- 2. Respondent shall disclose in any advertisement or solicitation that may reasonably be viewed by residents of the State of California, including, but not limited to, any Internet web page or advertisement that their health care membership product is not available in the State of California.
- 3. Respondent shall make refund all monies to demanding members without undue delay.

Dated: September 22, 2004

LUCINDA EHNES

Director

Department of Managed Health Care

By:

AMY L. DOBBERTEEN

Assistant Deputy Director

Office of Enforcement

Department of Managed Health Care